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SERIAL NUMBER 10/663,307	FILING OR 371(c) DATE 09/16/2003 RULE	CLASS 220	GROUP ART UNIT 3727	ATTORNEY DOCKET NO. I6524
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APPLICANTS

Dale A. Frantz, Toledo, OH;

** CONTINUING DATA ****

This application is a CIP of 29/180,327 04/21/2003 PAT D,483,917

** FOREIGN APPLICATIONS ****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 12/09/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

50659

TITLE

Handheld container with removable divider

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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